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To: Examiner Lourdes C. Cruz
From: Leslie S. Szivos
Fax: 703-872-9319
Pages: 13 Including cover
Phone:
Date: 7/18/2002
Re: U.S. Patent Appln. No. 09/413,462
IBM Ref. YOR919990358US1
SSMP Docket: 12906
For: SILICATE GATE DIELECTRIC
cc:


FINAL REJECTION**• Comments:**

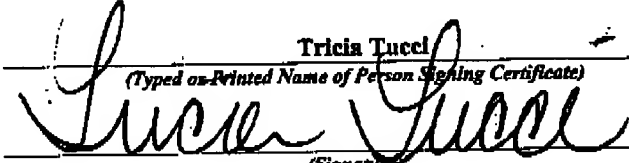
1. Amendment Transmittal Letter (in duplicate)
2. Response under 37 C.F.R. §1.116
3. Authorization to Charge Deposit Account
4. Certificate of Transmission by Facsimile dated July 18, 2002

Applicants: Eduard A. Cartier, et al.
Serial No. 09/413,462
Filed: October 6, 1999
For: SILICATE GATE DIELECTRIC
Docket: YOR919990358US1 (12906)
Dated: July 18, 2002

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AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. YOR919990358US1 (12906)	
Applicant(s): Eduard A. Cartier, et al.					
Serial No. 09/413,462	Filing Date October 6, 1999	Examiner Lourdes C. Cruz		Group Art Unit 2827	
Invention: SILICATE GATE DIELECTRIC					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	13 -	34 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	3 -	4 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-0510/IBM A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: July 18, 2002		
Leslie S. Szivos Registration No. 39,394 SCULLY, SCOTT, MURPHY & PRESSER 400 Garden City Plaza Garden City, New York 11530 (516) 742-4343			FAX COPY RECEIVED JUL 18 2002 TECHNOLOGY CENTER 2800		
LSS:tt GC:			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231. _____ Signature of Person Mailing Correspondence _____ Typed or Printed Name of Person Mailing Correspondence		

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. YOR919990358US1 (12906)
Applicant(s): Eduard A. Cartier, et al.			
Serial No. 09/413,462	Filing Date October 6, 1999	Examiner Lourdes C. Cruz	Group Art Unit 2827
Invention: SILICATE GATE DIELECTRIC			
<p>I hereby certify that this _____ <u>Response under 37 C.F.R. §1.116</u></p> <p style="text-align: center;"><small>(Identify type of correspondence)</small></p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(703) 872-9319</u>)</p> <p>on <u>July 18, 2002</u></p> <p style="text-align: center;"><small>(Date)</small></p> <div style="text-align: right; margin-top: 50px;"> <p>_____ Tricia Tucci <small>(Typed or Printed Name of Person Signing Certificate)</small></p> <p>_____  <small>(Signature)</small></p> </div>			

Note: Each paper must have its own certificate of mailing.

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